SUPPLEMENTAL DENTAL REPORT

☐ Missing Person | ☐ Unidentified Person

Today's Date	X-rays Available ☐ Yes ☐ No
Patient's Name	Date of Last Treatment
Charting Dentist's Name	Date Last X-rays Were Taken
Charting Dentist's Address	Dental Models Available ☐ Yes ☐ No
Charting Dentist's Telephone Number	Photographs of Teeth Available ☐ Yes ☐ No

Dentist's Remarks

Numeric Tooth Code	Federation Dentaire International (FDI)		(Attach additional sheets if necessary)	Deciduous	Universal Permanent	Status (/ - No available information; X – Missing; V – Unrestored virgin tooth)	Restoration/Caries (Place an "x" in applicable box to indicate restoration or caries if Status field is not X or V)					Other Characteristics (R – Root Canal, C- Crown)
							Mesial	Occlusal	Distal	Facial	Lingual	
01	18	Upper Right	Third Molar		1		☐	☐	☐	☐	☐	
02	17		Second Molar		2		☐	☐	☐	☐	☐	
03	16		First Molar		3		☐	☐	☐	☐	☐	
04	15		Second Bicuspid	A	4		☐	☐	☐	☐	☐	
05	14		First Bicuspid	B	5		☐	☐	☐	☐	☐	
06	13		Cuspid	C	6		☐	☐	☐	☐	☐	
07	12		Lateral Incisor	D	7		☐	☐	☐	☐	☐	
08	11		Central Incisor	E	8		☐	☐	☐	☐	☐	
09	21	Upper Left	Central Incisor	F	9		☐	☐	☐	☐	☐	
10	22		Lateral Incisor	G	10		☐	☐	☐	☐	☐	
11	23		Cuspid	H	11		☐	☐	☐	☐	☐	
12	24		First Bicuspid	I	12		☐	☐	☐	☐	☐	
13	25		Second Bicuspid	J	13		☐	☐	☐	☐	☐	
14	26		First Molar		14		☐	☐	☐	☐	☐	
15	27		Second Molar		15		☐	☐	☐	☐	☐	
16	28		Third Molar		16		☐	☐	☐	☐	☐	
17	38	Lower Left	Third Molar		17		☐	☐	☐	☐	☐	
18	37		Second Molar		18		☐	☐	☐	☐	☐	
19	36		First Molar		19		☐	☐	☐	☐	☐	
20	35		Second Bicuspid	K	20		☐	☐	☐	☐	☐	
21	34		First Bicuspid	L	21		☐	☐	☐	☐	☐	
22	33		Cuspid	M	22		☐	☐	☐	☐	☐	
23	32		Lateral Incisor	N	23		☐	☐	☐	☐	☐	
24	31		Central Incisor	O	24		☐	☐	☐	☐	☐	
25	41	Lower Right	Central Incisor	P	25		☐	☐	☐	☐	☐	
26	42		Lateral Incisor	Q	26		☐	☐	☐	☐	☐	
27	43		Cuspid	R	27		☐	☐	☐	☐	☐	
28	44		First Bicuspid	S	28		☐	☐	☐	☐	☐	
29	45		Second Bicuspid	T	29		☐	☐	☐	☐	☐	
30	46		First Molar		30		☐	☐	☐	☐	☐	
31	47		Second Molar		31		☐	☐	☐	☐	☐	
32	48		Third Molar		32		☐	☐	☐	☐	☐	

☐ (Box A) Dentist - Check here if all 32 teeth are present without decay, restoration, or any unusual characteristics. (Terminal operator – enter code ALL in the DCH field.

☐ (Box B) Dentist – Check here if information is not available for coding the above chart. (Terminal operator – enter the code UNK in the DCH field.)

INSTRUCTIONS FOR COMPLETION AND ENTRY OF SUPPLEMENTAL DENTAL INFORMATION

COMPLETION INFORMATION

Status Codes:

Code	Description
/	No available information.
X	Missing. Tooth extracted during the life of the individual.
V	Unrestored virgin tooth. Tooth may have caries but no restoration.

Restoration/Caries:
Indicate restorations or caries by placing an "X" in applicable tooth surface box for mesial, occlusal, distal, facial, and lingual surface. Note that buccal has been replaced by facial. Terminal Operators - see below for entry codes.

Do not complete Restoration/Caries information for teeth that have "X" or "V" in the Status field.

Other Characteristics (Secondary Codes)

Code	Description
C	Crown. Any laboratory processed restoration such as a gold crown or porcelain crown.
R	Root Canal. Any type of endodontic procedure that has been performed on the tooth.

ENTRY INFORMATION- DCH Field

Enter "ALL" or "UNK" in DCH field if the dentist marks boxes A or B.

Use the following codes after the numeric tooth code when the surface code boxes are marked by the dentist:

Column	Code
Mesial	M
Occlusal	O
Distal	D
Facial	F
Lingual	L

The DCH field contains a maximum of 32 numeric tooth codes consisting of two numeric characters followed by option 1, 2, or 3.

1. One special character /, or one special character / followed by R.
2. One alphabetic character M, O, D, F, L, X, or V.
3. Two to seven alphabetic characters M, O, D, F, L, C, and R. Note that any combination of M, O, D, F, or L must be entered in the sequence of M, O, D, F, or L.

Each numeric tooth code can be used only once.
The R character should follow any combination of M, O, D, F, L, C, or the / character.
The C character should follow any combination of M, O, D, F, or L.
The characters X and V should not be used with any combination of characters.
The characters of M, O, D, F, L, C, R, /, V, and X may be used only once per numeric tooth code.

Any modification of a code for the 01 through 32 tooth codes will replace existing coding for that tooth. For example, if 01MO was initially entered and 01FL was modified into the record, the record will read 01FL. To add FL for tooth 01, then entry must appear as 01MOFL.